



Flexible Spending Account
Direct Deposit Authorization

Please complete & return to FlexAmerica. There is no need to complete a new form for this plan year if you had the direct deposit feature with your flexible spending account last year. Direct deposit will become effective 3 weeks from the date of receipt.

I hereby authorize FlexAmerica, Inc. to initiate credit entries or debit entries to correct errors, depositing my Flexible Spending Account reimbursements into my account designated below and, if necessary, make corrections for any entries made to my account in error. This authority is to remain in full force and effect until FlexAmerica, Inc. has received written notification from me of its termination in such time and such manner as to afford FlexAmerica, Inc. a reasonable opportunity to act on it. Please check with your financial institution before drawing funds. The funds will **generally** be available 4 business days after the check date. FlexAmerica is not responsible for overdraft charges.

Employee Name	SSN	Home Phone	Work Phone
Please Indicate: <input type="checkbox"/> Initial Set-Up <input type="checkbox"/> Change <input type="checkbox"/> Cancel		Please Indicate: <input type="checkbox"/> Checking Account * <input type="checkbox"/> Savings Account **	
Bank Name	Routing Number	Account Number	Bank Phone
Employer Name			

*Checking Accounts: Please attach a VOIDED CHECK. Deposit slips are not accepted.

**Savings Accounts: Please contact your financial institution for appropriate account & routing numbers.

If you send in this enrollment form and your employer has not enrolled in the direct deposit option, the enrollment form and cancelled check will be destroyed for confidentiality purposes. A new form will have to be submitted if your employer subsequently enrolls in this option.

Employee Signature _____ Date _____

<u>For Home Office Use Only</u>		
Effective Date ____/____/____	Processed Date ____/____/____	Processor _____

Please fax or mail this form & your voided check to FlexAmerica:
13511 Label Lane Suite 201, Hagerstown, MD 21740
301-564-5191 fax